

AMENDMENT / RESPONSE TRANSMITTAL


Applicant : Girard et al.
App. No. : 10/733,878
Filed : December 10, 2003
For : THAP PROTEINS AS
NUCLEAR RECEPTORS FOR
CHEMOKINES AND ROLES
IN TRANSCRIPTIONAL
REGULATION, CELL
PROLIFERATION AND CELL
DIFFERENTIATION
Examiner : Unknown
Art Unit : 1632

CERTIFICATE OF MAILING

I hereby certify that this correspondence and all marked attachments are being deposited with the United States Postal Service as first-class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on

July 8, 2004

(Date)



Jerry L. Heiner, Reg. No. 53,009

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith for filing in the above-identified application is the following enclosure:

- (X) Power of Attorney in 2 pages.
- (X) Please charge any additional fees, including any fees for additional extension of time, or credit overpayment to Deposit Account No. 11-1410.


Jerry L. Heiner
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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Group Art Unit: 1632

Filed: December 10, 2003

Examiner: Unknown

The undersigned hereby revoke any previous powers of attorney in the subject application, and hereby appoint the registrants of Knobbe, Martens, Olson & Bear, LLP, 2040 Main Street, Fourteenth Floor, Irvine, California 92614, Telephone (949) 760-0404, **Customer No. 20,995**, as their attorneys with full power of substitution and revocation to prosecute this application and to transact all business in the U.S. Patent and Trademark Office connected herewith. This appointment is to be to the exclusion of the inventors and his attorneys in accordance with the provisions of 37 C.F.R. § 3.71.

App. No. : 10/733,878

Filed : 12/10/03

The undersigned hereby authorize and request the registrants of Knobbe, Martens, Olson & Bear, LLP, Customer Number 20,995, to designate any U.S. patent application that is jointly owned by the assignees and which has been filed by a registrant of that law firm as the subject application by inserting into the above caption the name of applicant(s), the application number, the filing date, the title of the application, the attorney docket number, and where appropriate, the name of the Examiner responsible for the Examination of the application.

Please use **Customer No. 20,995** for all communications.

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